ETITION FOR EXTENSION OF TIME UNDER	llection of Information unless if displays a valid OMB cor Docket Number (Optional) 35997-215056				
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)					
Application Number 09/919,960-Conf	09/919,960-Conf. #4262		Filed August 2, 2001		
For METHOD AND SYSTEM PROVIDING IMPR	OVED SECURITY	FOR THE TRAN	SFER OF ROOT KEYS		
Art Unit 2137		Examiner	M. J. Pyzocha		
This is a request under the provisions of 37 CFR 1.	136(a) to extend the	e period for filing a	reply in the above		
identified application. The requested extension and fee are as follows (ch	eck time period des	ired and enter the	appropriate fee below		
	Fee	Small Entity I	ee		
X One month (37 CFR 1.17(a)(1))	\$120	\$60	\$120.00		
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$		
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$		
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
Applicant claims small entity status. See 37	CFR 1 27				
	•				
A check in the amount of the fee is enclosed					
A check in the amount of the fee is enclosed Payment by credit card. Form PTO-2038 is					
	attached.	application to a D	eposit Account.		
Payment by credit card. Form PTO-2038 is X The Director has already been authorized to X The Director is hereby authorized to charge	attached. charge fees in this any fees which may	be required, or c	redit any overpayment		
Payment by credit card. Form PTO-2038 is X The Director has already been authorized to	attached. charge fees in this any fees which may	be required, or c			
Payment by credit card. Form PTO-2038 is X The Director has already been authorized to X The Director is hereby authorized to charge Deposit Account Number 22-0261	attached. charge fees in this any fees which may	be required, or c	redit any overpayment		
<ul> <li>Payment by credit card. Form PTO-2038 is</li> <li>X The Director has already been authorized to</li> <li>X The Director is hereby authorized to charge Deposit Account Number 22-0261</li> <li>I am the applicant/inventor.</li> </ul>	attached. charge fees in this any fees which may I have enc	be required, or c osed a duplicate	redit any overpayment		
<ul> <li>Payment by credit card. Form PTO-2038 is</li> <li>X The Director has already been authorized to</li> <li>X The Director is hereby authorized to charge Deposit Account Number 22-0261</li> <li>I am the applicant/inventor.</li> <li>assignee of record of the ent</li> </ul>	attached. charge fees in this any fees which may I have enc ire interest. See 37	be required, or c osed a duplicate CFR 3.71.	redit any overpayment copy of this sheet.		
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number		09/919,960-Conf. #4262			
FEE TR	FEE TRANSMITTAL         For FY 2007         Applicant claims small entity status. See 37 CFR 1.27		Filing Date First Named Inventor Examiner Name Art Unit		August 2, 2001 Bruno Couillard M. J. Pyzocha 2137		
Applicant claims sn							
TOTAL AMOUNT OF PAYMENT (\$) 120.00			Attorney Docket No.		35997-215056		
METHOD OF PAYME	ENT (check all that	apply)					
Check Credi	it Card Mon	ney Order Nor	ne Other (	please iden	tify):		
X Deposit Account D	Deposit Account Number	22-0261 Deposit Act	count Name:		Venable LLI	P	
For the above-id	entified deposit acc	ount, the Director is	s hereby authorize	ed to: (che	ck all that apply)		
x Charge fee	e(s) indicated below	,	Charg	e fee(s) ind	dicated below, ex	cept for th	e filing f
x Charge any	y additional fee(s) o ler 37 CFR 1.16 and	or underpayments c d 1,17	of x Credit	any overp	ayments		
FEE CALCULATION					······································		
1. BASIC FILING, SEAR		ATION FEES					
	FILING I		ARCH FEES	EXAMI	NATION FEES		
Application Type		nall Entity Fee (\$)	Small Entity 5) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)
Utility	300		250	200	100		
Design	200	100 100		130	65		
Plant	200	100 300	150	160	80		
Reissue	300	150 500	250	600	300		
Provisional	200	100 0	0	0	0		
2. EXCESS CLAIM FEE	S						Small En
Fee Description						<u>Fee (\$)</u>	Fee (\$)
Each claim over 20 (incl		Poissues)				50 200	25
Each indomendant aloins		Xelssues)				200 360	100 180
Each independent claim				м	ultiple Depende		100
Multiple dependent clair		(\$) Fee I	Paid (%)		dilipic Depende		
Multiple dependent clair <u>Total Claims</u> Ext	tra Claims Fee	(\$) Fee   =	Paid (\$)	Fe	e (\$) F	Fee Paid (\$)	
Multiple dependent clair	tra Claims Fee x	=	Paid (\$)	<u>Fe</u>	<u>ee (\$)</u>	Fee Paid (\$)	
Multiple dependent clair <u>Total Claims</u> Ext <u>29</u> - 31 = HP = highest number of total	tra Claims Fee x	=	Paid (\$) Paid (\$)	<u>Fe</u>	<u>99 (\$)                                    </u>	Fee Paid (\$)	_
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Multiple dependent clair <u>Total Claims</u> Ext <u>29</u> - 31 = HP = highest number of total <u>Indep. Claims</u> Ext <u>5</u> - 5 = HP = highest number of inde <b>3. APPLICATION SIZE F</b> If the specification and listings under 37 CF sheets or fraction the <u>Total Sheets</u>	tra Claims Fee xx I claims paid for, if great tra Claims X pendent claims paid for FEE I drawings exceed 1 FR 1.52(e)), the app ereof. See 35 U.S. Extra Sheets	= ter than 20. (\$) Fee f = f, if greater than 3. 100 sheets of paper plication size fee du C. 41(a)(1)(G) and <u>Number of each a</u>	Paid (\$) (excluding electrue is \$250 (\$125 f) 37 CFR 1.16(s). additional 50 or frac	onically fi for small e	led sequence or ntity) for each ac of <u>Fee (\$)</u>	computer dditional 50	_
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